

ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

1740 W. Adams St., Suite 4600, Phoenix, Arizona 85007 Phone: 602-364-1PET(1738) ♦ Fax: 602-364-1039 VETBOARD.AZ.GOV

VICTORIA WHITMORE, EXECUTIVE DIRECTOR

Dear Veterinary Faculty Member License Applicant:

Thank you for your request for an application and information regarding Arizona's veterinarian licensing procedures. You may be eligible for several types of veterinary licenses available; therefore, before applying, you may want to review information on the Board's website explaining "Regular," "Specialty," and "Endorsement" licenses.

Veterinary Faculty Member License summary:

- The applicant has been appointed to the faculty of a veterinary college in the state of Arizona.
- <u>The licensee may practice veterinary medicine only under the licensee's official</u> academic responsibilities.
- No State exam is required.
- The applicant is a graduate from a college of veterinary medicine accredited by the AVMA, or holds a certificate of completion issued by the ECFVG or PAVE.
- To renew a license, proof of 20 hours of continuing education is <u>not</u> required.
- \$400 application fee plus \$100 (even-numbered year) or \$200 (odd-numbered year) license issuance fee.
- Licenses expire on the date of the separation of employment by the veterinary college or December 31st of even-numbered years. Renewal fee: \$400.

The following pages include the application process check list, list of applicable deadlines, and the application for <u>Veterinary Faculty Member</u> applicants only. If you would like to apply for a different type of veterinary license, please see our website at vetboard.az.gov for the application packet you desire. Please feel free to direct questions regarding the application process, to our Licensing Administrator, Kodi Calais, at (602) 542-8166.

Sincerely,

Victoria Whitmore
Victoria Whitmore
Executive Director

APPLICATION PROCESS & CHECK-LIST

APPLICATION FOR VETERINARY FACULTY MEMBER LICENSE

The following must be submitted no later than five (5) days prior to a monthly Board meeting where the application will be reviewed: Properly completed and notarized application. Note: Applicant's date of signature must match the date notarized! A non-refundable application fee of \$400. Payable by money order or check to: AZVMEB. Credit Cards are **not** accepted. A passport-type photo of the applicant (no larger than 1½ x 2 inches in size) taken during the preceding 6 months. Veterinary College employment verification letter. Please have your employer submit a letter from an authorized person that: (1) states your hire date; (2) confirms your current employment; (3) includes your title; and (4) general job responsibilities. License Verifications - FORM INCLUDED WITH APPLICATION: Each state or territory of the United States in which you are or ever have been licensed must send directly to this Board a verification of licensure to include current standing and status of any current investigation or discipline received for violation of a veterinary medical practice act. Applicant is responsible for requesting verification of licensure from each state or territory, where currently or previously licensed. Each state's process may differ, and a fee may be assessed. Response time can vary up to six (6) weeks to process. Arizona Statement of Citizenship or Alien Status for State Public Benefits – FORM INCLUDED WITH APPLICATION. Be sure to fill it out completely and sign/date at the end of page two. **Evidence of authorized presence in the U.S.** (See list of acceptable documents in the application). Submit a <u>copy</u> of that proof (e.g. passport, U.S. birth certificate) with your application. In addition to the evidence of citizenship/authorized presence documentation, a copy of a government issued photo I.D. is required. If evidence of citizenship/authorized presence is submitted in the form of a document containing a photo, such as a U.S. passport, permanent resident card, U.S. driver's license, etc., then this requirement is fulfilled. Moral Character Letter of Recommendation/Professional Qualification Form – FORM INCLUDED WITH APPLICATION: A letter to be sent directly to this Board from a veterinarian indicating applicant's professional qualifications and character. This form may be used or the author of the letter may use his or her own letterhead. Not to be submitted with application. **Notes:** 1. Applicants for a Veterinary Faculty Member license are NOT required to take the State exam. 2. Licenses are not active until approved by the Board, the license issuance fee is paid, AND the license is issued by the Board. The following are not required for all applicants – only required as described. If applicant does not currently hold nor has ever held an Active veterinary license from any U.S. state, an official final transcript sent directly to this Board by the AVMA accredited veterinary college from which applicant graduated is required. The transcript must show graduation date and degree earned. If applicant completed the PAVE/ECFVG program, submit a copy directly to this Board of the ECFVG Certificate of Completion issued by the AVMA or a copy of the PAVE Certificate of Completion issued by the AAVSB. If the name on your application has changed from the name on the evidence of citizenship/ authorized presence, you are submitting, you must also submit a copy of the document that legally defines the change (i.e. marriage license).

2018 APPLICATION DEADLINES

NOTE!

IT IS RECOMMENDED THAT YOU SUBMIT YOUR APPLICATION AT LEAST 1-2 WEEKS PRIOR TO DEADLINE IN ORDER TO ENSURE COMPLETION BY THAT DEADLINE. Completion is determined by the Board.

Deadline to submit a complete application	Board Meeting Review Date
01/12/2018	01/17/2018
02/09/2018	02/21/2018
03/16/2018	03/21/2018
04/13/2018	04/18/2018
05/11/2018	05/16/2018
06/15/2018	06/20/2018
07/13/2018	07/18/2018
08/10/2018	08/15/2018
09/14/2018	09/19/2018
10/17/2018	10/12/2018
11/21/2018	11/16/2018
12/19/2018	12/14/2018

What to expect next!

- 1. Once your application is received and processed, you will receive a letter, either informing you that it is complete or with a list of deficiencies.
- 2. If complete, your name is placed on the agenda for Board approval at the following Board meeting.
- 3. Once the Board approves your license and we have received the license issuance fee of \$100 in an even-numbered year or \$200 in an odd-numbered year, it will be updated to active status. You will receive a wallet card with your license information and a wall license will be ordered for you and mailed approximately 60 to 90 days.

<u>Please note:</u> You are not allowed to practice until you have confirmed that your license has been updated to active status. You may do this by contacting Board staff or by viewing the directory located on our website.



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VICTORIA WHITMORE, EXECUTIVE DIRECTOR

APPLICATION FOR A LICENSE TO PRACTICE VETERINARY MEDICINE & SURGERY AS A VETERINARY FACULTY MEMBER

Alternative Format for Submitting Application

An individual with a disability who, as a result of the disability, requires this application to be in an alternative format may contact the Board office at (602) 364-1738, or Voice Relay Service (800) 842-4681 or TTY at (800) 367-8939 to make their needs known

367-8939 to make their needs	known.			
Board for licensure in the Star understand the filing of this a agency or board in the Unite my application and credent application to the Board is a	, make application to the of Arizona pursuant to A.R.S. Toplication grants authority to the distates or another country; and als submitted to the Board and dequate cause by the Board to mation to other licensing agencing	itle 32, Chapter 21, A Board to obtain infor In that I shall make an In that I acknowledge to deny my application	rticle 2: Licensi mation from a oath as to the hat any falsific	ng, et.seq. I ny licensing contents of cation in my
Submit Veterinary Facul (enclose with application) All fees are non-refundable an be submitted by cash, money check payable in U.S. dol	ry Member (\$400) d are to order, or	PLACE PHOTO HERE		
	SECTION 1: PERSONAL I	NFORMATION		
Name:		Maiden Name:		
Mailing Address:	Stre	eet		
City	County	State		Zip
Home Phone:	Cell phone:			
Fax Number	Email Address:			
SSN:	Date of Birth:	Gender:	Female	Male
Are you a US Citizen? Yes	No If no, what is your cou	,		

SECTION 2: EDUCATION & EXAMS

Name(s) of College/University	<u>Date(s) of</u> <u>Attendance</u>	<u>Date(s) of Graduation</u> <u>or Expected</u> Graduation	<u>Diploma(s) or Degree(s)</u> <u>Earned or to be Earned</u>



If you do not hold, or have never held an Active veterinary license in the United States and/or Canada, you must have an <u>official final transcript</u> sent directly to the Board by the AVMA-accredited veterinary college from which you graduated. The transcript must show graduation date and degree earned.

FOREIGN GRADUATES ONLY

- 1. Are you currently enrolled in either the ECFVG or PAVE program? Yes No
 - If Yes, Indicate Program: ECFVG PAVE

NOTE: If enrolled, a letter verifying your enrollment must be sent to this Board directly from AAVSB or AVMA.

- 2. Have you received a certificate of completion from the ECFVG program or the PAVE program?
 - **Yes** No If yes, please include a copy of the Certificate of Completion with this application.

SECTION 3: CURRENT VETERINARY COLLEGE EMPLOYMENT INFORMATION

College/Univers	ity Name:			
Business Addres	s:			
	Street	City	State	Zip
Contact Phone I	Number:			
Your position at	the college/university:			
Dates of Employ	ment [.]			

NOTE – Letter
from Employer

Please ensure that documentation is submitted from an authorized official at the college/university that indicates that you have been appointed to the faculty. The documentation must be submitted directly to the Board from the college/university.

SECTION 4: LICENSES --- LIST ALL STATES IN WHICH YOU ARE OR HAVE EVER BEENLICENSED

State	License Number	Date License Granted	Date(s) and Status (Active, Lapsed, Inactive, Probation, etc.)

SECTION 5: YOU ARE REQUIRED TO ANSWER ALL OF THE FOLLOWING QUESTIONS. YOU MAY USE A SEPARATE SHEET OF PAPER IF NEEDED.

1.	Have you ever been arrested, charged with, convicted of or pled nolo contendere to a crimina offense, other than a minor traffic violation (DUI history must be reported), in any city, county state, federal or tribal court, or in any other country? If yes, please provide copies of the police and court documents such as the police narrative, complaint, the pleadings and final order(s) You must answer "yes" even if you received a pardon, the charges were dropped, the conviction was set aside, the records were expunged, or your civil rights were restored.
	Date of Occurrence(s) Yes No
2.	Have you ever been denied a license by any state, or denied the privilege of taking a state examination before any State Board of Veterinary Medical Examiners? Yes No If yes, please explain:
3.	Has any license to practice veterinary medicine and surgery issued to you been revoked or suspended?
	Yes No If yes, please explain:
4.	Has any license to practice veterinary medicine and surgery issued to you been placed or

4. Has any license to practice veterinary medicine and surgery issued to you been placed on probation, or have you ever been fined, censored, or charged with a violation of the veterinary practice act in any state in the U.S? Are you aware of any pending complaints, investigations or disciplinary actions regarding your veterinary license in any state?

Yes No

SECTION 6: AFFIDAVIT OF APPLICANT

Print The Applicant's Full Name

duly sworn upon his or her oath deposes named in this application. I have read ar The information contained in the application and the information submitted is without authorize any past or present employer, past to release any information to the State of a state that a photocopy of this authorization also authorize the Arizona State Veterinary release any information submitted by me, agency, or to any other person when such Revised Statutes. I acknowledge that an adeny my application. I authorize the application interview that is conducted of	nd understand the concon is true and correct to fraud, deceit or misrest or present business or Arizona in connection was shall have the same a Medical Examining Boupon request, to the putch request is required any falsification in my consolid board to utilize autons.	tent of this application. o the best of my ability epresentation. I hereby professional association with my application and effect as the original. I eard, or its successor, to ublic or to any licensing or permitted by Arizona application is cause to dio recording of any
I further affirm that I have reviewed the Ariz the Administrative Rules that pertain to th Board.	•	• • •
Signature of Applicant:	Dat	e:
Subscribed and sworn to before me this	day of	, 20
STATE OF)		
COUNTY OF)		
	Notary Publ	ic Signature
Seal:	My Notary Comm	ission Evnires on

Please be advised of the following pursuant to Arizona Revised Statutes (ARS) §41-1030:

ARS §41-1030(B): An agency shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule or state tribal gaming compact. A general grant of authority in statute does not constitute a basis for imposing a licensing requirement or condition unless a rule is made pursuant to that general grant of authority that specifically authorizes the requirement or condition.

ARS §41-1030(D): This section may be enforced in private civil action and relief may be awarded against the state. The court may award reasonable attorney fees, damages and all fees associated with the license application to a party that prevails in an action against the state for a violation of this section.

ARS §41-1030(E): A state employee may not intentionally or knowingly violate this section. A violation of this section is cause for disciplinary action or dismissal pursuant to the agency's adopted personnel policy.

ARS §41-1030(F): This section does not abrogate the immunity provided by section 12-820.01 or 12-820.02

heina first



Address:_

Street

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MORAL CHARACTER LETTER OF RECOMMENDATION PROFESSIONAL QUALIFICATION FORM

Please provide your input regarding the moral character and profess applicant. Veterinarian may use his or her own letterhead. Please ret office. Form may be faxed or emailed to kodi.calais@vetboard.az.go	turn this form to the Board
Name of Applicant:	
Dear Veterinary Medical Examining Board:	
Signature of Veterinarian:	Date:
Print Veterinarian Name:	_ Phone:

City

State

Zip



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VERIFICATION OF LICENSURE

APPLICANT AUTHORIZATION:

Name:			Lice	ense Number:	
Address:					
Street			City	State	Zip
I authorize the Veterinary Med to the Arizona State Veterinary				(State) to release the info	ormation below
Applicant's Signature					
				Date)
BOARD VERIFICATION:					
Board Address:					
Street			City	State	Zip
Board Phone:	Boar	d Fax:			
Veterinarian's License Number	:				
Date License Issued:		_Expiratior	n Date:		
Current License Status: (Active	, Inactive,	Lapsed, e	etc.):		
Disciplinary Action:	No	Yes			
Current Disciplinary Action:	No	Yes			
Pending Disciplinary Action:	No	Yes			
If "yes" to any disciplinary action,	please att	ach a certi	fied copy o	of the Findings of Fact, Cond	clusions of Law,
and Final Order, or the charges of	f a pending	g case.			
Name of Board Official:		Please	e Print		
Signature of Board Official:					
Title of Board Official:			Dat	e of Signature	
Official Board Seal:					

ARIZONA STATEMENT OF CITIZENSHIP OR ALIEN STATUS FOR STATE PUBLIC BENEFITS

Professional License and Commercial License
- Arizona State Veterinary Medical Examining Board -

Title IV of the federal Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (the "Act"), 8 U.S.C. § 1621, provides that, with certain exceptions, only United States citizens, United States non-citizen nationals, non-exempt "qualified aliens" (and sometimes only particular categories of qualified aliens), nonimmigrants, and certain aliens paroled into the United States are eligible to receive state or local public benefits. With certain exceptions, a professional license and commercial license issued by a State agency is a State public benefit.

Arizona Revised Statutes § 41-1080 requires, in general, that a person applying for a license must submit documentation to the license agency that satisfactorily demonstrates the applicant's presence in the United States is authorized under federal law.

Directions: All applicants must complete Sections I, II, and IV. Applicants who are not U.S. citizens or nationals must also complete Section III.

Submit this completed form and a copy of one or more document(s) from the attached "Evidence of U.S. Citizenship, U.S. National Status, or Alien Status" with your application for license or renewal. If the document you submit does not contain a photograph, you must also provide a government issued document that contains your photograph. You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

SECTION I - ADDITION TIMEODALATION

SECTION 1 - AT LICANT INFORMATION
APPLICANT'S NAME (Print or type)
TYPE OF APPLICATION (Check one): INITIAL APPLICATION REAPPLICATION
TYPE OF LICENSE/CERTIFICATION (Check one): D.V.M. C.V.T.
SECTION II – CITIZENSHIP OR NATIONAL STATUS DECLARATION
Are you a citizen or national of the United States? Yes No
If Yes , indicate place of birth:
CityState (or equivalent)Country or Territory
If you answered Yes , 1) Attach a legible copy of a document from List A (attached)
Name of document
2) Go to Section IV.
If you answered No , you must complete Section III and IV.
SECTION III - ALIEN STATUS DECLARATION (if applicable)
To be completed by applicants who are not citizens or nationals of the United States. Please indicate alien status by checking the appropriate box. Attach a legible copy of a document from List B (Attached) or other document as evidence of your status.
Name of document provided:

Qualified Alien Status (8 U.S.C.§§ 1621(a)(1),-1641(b) and (c))

- 1. An alien lawfully admitted for permanent residence under the Immigration and Nationality Act (INA)
- 2. An alien who is granted asylum under Section 208 of the INA.
- 3. A refugee admitted to the United States under Section 207 of the INA.
- 4. An alien paroled into the United States for at least one year under Section 212(d)(5) of the INA.
- 5. An alien whose deportation is being withheld under Section 243(h) of the INA.
- 6. An alien granted conditional entry under Section 203(a)(7) of the INA as in effect prior to April 1, 1980.
- 7. An alien who is a Cuban/Haitian entrant.
- 8. An alien who has, or whose child or child's parent is a "battered alien" or an alien subject to extreme cruelty in the United States.

Nonimmigrant Status (8 U.S.C. § 1621(a)(2))

9. A nonimmigrant under the Immigration and Nationality Act [8 U.S.C § 1101 et seq.] Nonimmigrants are persons who have temporary status for a specific purpose. See 8 U.S.C § 1101(a)(15).

Alien Paroled into the United States For Less Than One Year (8 U.S.C. § 1621(a)(3))

10. An alien paroled into the United States for less than one year under Section 212(d)(5) of the INA

Other Persons (8 U.S.C § 1621(c)(2)(A) and (C)

- 11. A nonimmigrant whose visa for entry is related to employment in the United States, or
- 12. A citizen of a freely associated state, if section 141 of the applicable compact of free association approved in Public Law 99-239 or 99-658 (or a successor provision) is in effect [Freely Associated States include the Republic of the Marshall Islands, Republic of Palau and the Federate States of Micronesia, 48 U.S.C. § 1901 et seq.];
- 13. A foreign national not physically present in the United States.

Otherwise Lawfully Present

14. A person not described in categories 1-13 who is otherwise lawfully present in the United States. PLEASE NOTE: The federal Personal Responsibility and Work Opportunity Reconciliation Act may make persons who fall into this category ineligible for licensure. See 8 U.S.C. § 1621(a).

SECTION IV - DECLARATION

All applicants must complete this

declare under penalty of perjury under the laws of the state of Arizona that the answers and evidenc	e l
have given are true and correct to the best of my knowledge.	

APPLICANT'S SIGNATURE	DATE SIGNED

EVIDENCE OF U.S. CITIZENSHIP. U.S. NATIONAL STATUS. OR ALIEN STATUS

You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

Evidence showing authorized presence in the United State includes the following:

- 1. An Arizona driver license issued after 1996 or an Arizona non-operating identification license.
- 2. A driver license issued by a state that verifies lawful presence in the United States.
- 3. A birth certificate or delayed birth certificate showing birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time)
- A United States certificate of birth abroad.
- 5. A United States passport. ***Passport must be signed***
- 6. A foreign passport with a United States visa.
- 7. An I-94 form with a photograph.
- 8. A United States citizenship and immigration services employment authorization document or refugee travel document.
- 9. A United States certificate of naturalization.
- 10. A United States certificate of citizenship.
- 11. A tribal certificate of Indian blood.
- 12. A tribal or bureau of Indian affairs affidavit of birth.
- 13. Any other license that is issued by the federal government, any other state government, an agency of this state or a political subdivision of this state that requires proof of citizenship or lawful alien status before issuing the license.